DEPARTMENT OF VETERANS AFFAIRS JACK C. MONTGOMERY VA MEDICAL CENTER (JCMVAMC)

FY 2013 ANNUAL REPORT

HOMELESS AND COMPENSATED WORK THERAPY PROGRAMS

INTRODUCTION

Fiscal Year 2013 marked another year of tremendous growth and change in the Homeless and Compensated Work Therapy (CWT) programs. Diligent work by staff in both programs has helped the Jack C. Montgomery VA Medical Center get closer to reaching Secretary Shinseki's goal of eradicating Veteran homelessness by 2015. The six pillars identified in the plan are outreach/education, treatment services, prevention services, housing/supportive services, income/employment/benefits and community partnerships. The following annual report is a snapshot and a review of services being provided.

Programs are broken out into four program areas: Outreach, Transition Services, Permanent Housing and Work Therapy. Over 1,032 unique Veterans were treated by Homeless Program staff in FY13, an increase from 788 served in FY 12 and 650 served in FY11. In the Compensated Work Therapy program in FY13, 235 unique Veterans were treated which is also a slight increase from 214 in FY 12 and 200 in FY11.

OUTREACH

• Introduction:

Homeless outreach services at the JCMVAMC expanded during FY 2013, as part of the VA's 5-year plan to end Veteran homelessness. The core of the VA Homeless Program is to reach homeless Veterans in shelters, on the streets or other locations not meant for human habitation to assist with obtaining benefits and linkage with services to end homelessness.

Outreach Services are broken into the following programs:

HOMELESS OUTREACH

• Current Services:

- 1. *Outreach*-During FY 2013, outreach was conducted on a weekly basis at various shelters, soup kitchens, camps and other locations as identified by community referrals to include rural areas. Due to outreach staff expansion, VA Homeless Program staff are able to conduct street and encampment outreach. VA outreach team members and peer specialist team up with a community outreach group at least monthly to target encampments and chronically homeless Veterans.
- 2. *Prevention* Homeless staff also provided homeless prevention services to Veterans calling into the National Call Center for Homeless Veterans, Veterans walking into the hospital or outpatient clinic, and referrals from VA providers or community partners. National Call Center referrals increased from 210 referrals in FY12 to 319 in FY13. Veterans Justice Outreach (VJO) staff provided outreach and identified legally involved Veterans through collaboration with local courts and jails. VJO staff assist with transition from incarceration to community reintegration through education, advocacy and referrals.

- 3. *MHICM RANGE* The Mental Health Intensive Case Management (MHICM) Rural Access Network for Growth Enhancement (RANGE) began at the JCMVAMC in May 2010 providing services to Veterans diagnosed with a severe mental illness. This program also provides homeless outreach services in rural communities and partners with Homeless Program staff to ensure coordination of care and proper referrals.
- 4. Supportive Services for Veteran Families (SSVF, locally known as BRRX)- In FY2011 the Community Service Council of Tulsa was awarded the SSVF grant offering homeless prevention services, including case management and financial assistance, to Veterans and their families. VA staff meet with BRRX staff monthly and with appropriate releases, staff mutual Veteran cases.
- 5. Stand Down- Each fall the Fall Stand Down for Homeless Veterans is held at the American Legion Post in Sapulpa and serves as an efficient outreach method to reach Veterans in the community. FY 13 marked the 11th and final year for this event serving 169 Veterans, an increase from 152 in FY12. The JCMVAMC Homeless and CWT program cohosted a third Stand Down in FY2013 with a church and numerous other community partners in Tulsa. This 3rd annual event served 172 homeless Veterans and 62 civilians. Over 40 community agencies/partners participated in the event with over 150 volunteers.
- 6. *Education* The JCMVAMC Public Affairs office created an educational video of Homeless and CWT programs in FY11. This video is used during community presentations and posted on the local website to provide an overview of services available.

• New Initiatives:

- 1. Street and Encampment Outreach- In FY 13, the VA was invited to attend a newly structured group focusing on outreach to homeless living in encampments. The group consists of at least 10 community agencies and intends to work with city leaders to identify and assist those living in encampments.
- 2. *New SSVF program* KIBOIS received the SSVF grant and began serving Veterans in FY13. KIBOIS and BRRX offer services in 3 mutual JCMVAMC catchment area counties (Okmulgee, Muskogee and Cherokee). Veterans are offered the opportunity to choose which agency will provide assistance. VA and KIBOIS expect to begin meeting monthly in FY14 to staff mutual cases.

• Performance Analysis of Outreach:

Performance Measure	FY 2013 Benchmark	FY 2012 Results	FY 2013 Results	Measure of concern
Increase number of National Homeless Call Center referrals	Increase by 20%	210 calls	319 calls (52% increase)	None

TRANSITION SERVICES

• Introduction:

The purpose of transitional housing services is to promote the development and provision of supportive housing and/or supportive services with the goal of helping homeless Veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination.

Transitional Housing Services are broken into the following programs:

• Current Services:

- 1. Healthcare for Homeless Veterans (HCHV) contracts- 50 admissions & 36 discharges (including designated emergency beds):
 - a. 12 & 12, Inc.- This contract offers 4 beds per month to homeless female Veterans for up to 6 months who have a substance use disorder or co-occurring disorder. If beds are not occupied by female Veterans, male Veterans can be considered for admission. Veterans participate in individual and group counseling, receive case management services and either work, volunteer or attend school. The JCMVAMC spent \$43,160 on this contract in FY13.
 - b. *Walker Hall* This contract offers 3 beds per month to homeless female and male Veterans for up to 6 months who have a mental health or co-occurring disorder. Veterans participate in case management and either work, volunteer or attend school. The JCMVAMC spent \$41,265.83 on this contract in FY13.
 - c. *Yale Apartments* This contract offers a total of 10 beds per month to homeless female and male veterans for up to 6 months who have a mental health or co-occurring disorder. Three of these 10 beds are designated as emergency beds with a goal of providing interim residence while awaiting admission to another housing program. Veterans participate in case management and either work, volunteer or attend school. VA Central Office awarded funds for this contract and \$123,671.40 was expended in FY13 for this contract.

2. Homeless Grant and Per Diem Program (GPD)- 65 admissions and 59 discharges:

a. *Bryce House-* This GPD program offers 31 beds for up to 24 months to homeless male Veterans in recovery from a substance use disorder or co-occurring disorder. Veterans participate in individual and group counseling, receive case management services and either work, volunteer or attend school. During a Veteran's first year of residency at Bryce House, they will be charged 10% of their income and 20% during their second year. With these modifications, Veterans will be better able to pay off

- outstanding debts/fines and build savings faster to ensure successful transition to independent housing. In FY 13, \$407,206.20 was expended on this grant project.
- b. *National Performance Measure* The GPD performance measure monitored the percentage of Veterans discharged to independent housing from a GPD program. The performance measure goal was set at 60%. The JCMVAMC exceeded this goal at 62.26%.

• New Initiatives:

1. New GPD Program- In 2011, the Restoring Lives Program was awarded a GPD capital and per diem grant to offer an additional 25 beds to homeless males. This program's target population is homeless Veterans released from incarceration and those recovering from substance use disorders. The project experienced some construction delays, but was able to begin admitting Veterans in January 2013. In FY 13, \$98,573.40 was expended on this grant project.

Performance Analysis of Transition Services:

Performance Measure	FY 2013 Benchmark	FY 2012 Results	FY 2013 Results	Measure of concern
% of Veterans discharged to independent housing from GPD program	60%	80%	62.26%	Noted reduction in results from one FY to another, but not a measure of concern

PERMANENT HOUSING

• *Introduction:* The Housing and Urban Development-VA Supported Housing (HUD-VASH) Program is a joint venture between Housing and Urban Development (HUD) and VA. This program began at the JCMVAMC in 2008. It involves intensive case management related to resolving issues that have the potential to destabilize the Veteran and/or Veteran's family stability in the community and/or reinforcing supports or access to services that can help offer additional stability. Veterans who participate in the program receive a housing voucher that subsidizes their rent.

• Current Services:

1. *HUD-VASH* -The HUD-VASH program experienced some growth in FY13 with receipt of 25 additional vouchers and 1 additional FTE to provide case management and support services to Veterans. This brought the total number of vouchers allocated to the

- JCMVAMC catchment area to 185. The program continues to focus on the most vulnerable populations, including Veterans who are chronically homeless, served during OEF/OIF, have families, women, and those with disabilities.
- 2. Substance Use Disorder Specialist (SUD Specialist)- In November 2010, the JCMVAMC hired a HUD-VASH SUD Specialist with VA Central Office initiative funds. Although funded under the HUD-VASH initiative, the specialist is able to assist Veterans in other homeless programs as well (i.e. GPD, HCHV, etc.). The SUD specialist provides case management and supportive therapy to homeless Veterans in the community. This worker provides Social Work interventions for individuals, families and groups. The specialist acts as a liaison with community agencies and coordinates community-based services including referrals to or from VA programs, government programs, and community agency programs. Currently, the SUD specialist provides a SUD group at one of the HCHV contract sites and the new GPD site.
- 3. The HUD-VASH program continues to send referrals to the DAV based on the informal agreement with a local chapter who has agreed to provide household items (i.e. furniture) to Veterans participating in a VA Homeless Program.

• New Initiatives:

- 1. The HUD-VASH program developed a mutual training schedule for staff with local programs, BRRX and Pathways, to ensure understanding of available services with the goal of optimizing Veteran/patient care.
- 2. A "Housing Trolley" schedule was developed to assist Veterans with housing searches. Various staff rotated driving Veterans seeking housing with a HUD-VASH voucher to several apartments throughout town maximizing use of staff time and ensuring Veterans are able to view various housing options.

• Performance Analysis of Permanent Housing:

Performance Measure	FY 2013 Benchmark	FY 2012 Results	FY 2013 Results	Measure of concern
% vouchers issued that resulted in a homeless Veteran achieving resident status in Public Housing Authority (point in time)	88%	92%	91.88%	None

WORK THERAPY

• *Introduction:* The Compensated Work Therapy programs are based on a recovery-oriented model and offer a continuum of work restoration services. Veterans are financially compensated for their work and in turn, improve their economic and social well-being as they prepare for community re-entry.

• Current Services:

- 1. Transitional Work (TW)- Contracts are negotiated with participating industries (including the VA and other agencies) for therapeutic work assignments. Veterans provide labor as part of their overall treatment program and vocational plan. The purpose is to develop skills to facilitate their transition into the competitive work environment. TW reflects the realities of the competitive workplace. Work is performed under the supervision of a VA employee and indirectly under the supervision of the VA Vocational Rehabilitation Specialist. On average, a Veteran participates in the TW program for 6 months, but if clinically indicated, can remain in the TW program longer. The TW program served 86 Veterans in FY13. Veterans in TW worked a total of 49,618.63 hours and received a total of \$364,929.16 in paid therapeutic benefits.
- 2. Supported Employment (SE)- SE is designed to expand vocational opportunities for Veterans with severe mental illness by emphasizing job accommodation, community-based employment, support and long-term follow-up. Employment specialists seek and locate real jobs in the community that match veterans' interests, skills and ability to work, even if only for a few hours a week. The SE program served 42 Veterans in FY13.
- 3. *Homeless Veteran Supported Employment (HVSEP)* The HVSEP program provides assistance in locating and maintaining competitive community professions for homeless Veterans who require assistance in career seeking and job stability, and have a desire for meaningful work. It is a partnership among the Veteran and Employment Specialist in determining the goals and abilities of the Veteran, and designing and implementing a plan of action to make those ambitions and passions a reality. The JCMVAMC HVSEP program began in the 3rd quarter of FY11 and in FY 1 served 48 homeless Veterans with a total caseload employment rate of 42%. The Employment Specialist in this program is a previously homeless Veteran.

• New Initiatives:

1. Nationally, HVSEP program funding offered by the CWT office in VACO will phase out at the end of FY14. In anticipation of this possible gap in matching Veterans with employment services, VACO Homeless office began funding Vocational Development Specialists at the end of FY13. This specialist will offer many of the same employment services as the HVSEP program, but will also be able to serve those who are risk of

homelessness, but not currently enrolled in a Homeless program (i.e. GPD, HCHV, HUD-VASH).

• Performance Analysis of Work Therapy:

Performance Measure	FY 2013 Benchmark	FY 2012 Results	FY 2013 Results (total caseload)	Measure of concern
Ensure employment, schooling or volunteer opportunities for Veterans discharging from CWT programs (TWE)	40%	55%	63.8%	None
Ensure employment, schooling or volunteer opportunities for Veterans discharging from CWT programs (SE)	40%	55%	50%	None
Percentage of Veterans enrolled in HVSEP program employed	35%	40%	42%	None

COMPLAINTS AND FEEDBACK ABOUT HOMELESS AND CWT SERVICES

An analysis of complaints and feedback from Veterans and Stakeholders resulted in the following actions:

- > Stakeholder surveys from various VA Services and community partners convey an overwhelming appreciation for the collaborative and supportive services provided by both the Homeless and CWT Programs.
- ➤ Local shelter who serves the most homeless individuals in the city, requested additional day of outreach. As a result, homeless outreach staff added an additional day of outreach to this shelter.
- ➤ TWE stakeholder identified lack of timely receipt of bill. TWE Coordinator consulted with Fiscal who agreed that early notification can be provided by TWE Coordinator while Fiscal processes essential paperwork.

	OPI	PORTUNITIES			
>	➤ Ending Homelessness — With continued growth in the HUD-VASH program and the addition of another GPD project, the JCMVAMC is closer to meeting the goal of ending Veteran homelessness. Although development of the Five-Year Plan to End Veteran Homelessness appears to target only the Homeless Program, there is a large impact on the CWT program due to homeless Veterans often seeking work therapy and employment opportunities. Quarterly monitoring and necessary updates to the strategic and five-year plan will be made to assist with reaching the goal to eradicate Veteran homelessness.				
>		veness of outreach efforts during the Stand Down, the bined to focus energy on reaching the most vulnerable			
>	month to ensure ongoing communic	VT staff attend at least one community meeting per cation with community partners about program staff to learn about essential resources available for			
>	need for VA Homeless Program sta	act with Cherokee Nation Vet Center to determine the aff to develop mutual agreements to serve Native struction of their Veteran Center is expected to be			
	tached is FY13 outcome tracking repaction data	oort which includes Veteran and stakeholder			
Melan	nie Goldman	Steffanie Ward			
Homeless/CWT Program Manager		Chief, Social Work			